

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0105746

Insp Area: 3

Thos Bros: 318D1

Site Address: 3311 POWER INN RD SAC

Parcel No: 079-0310-047

Sub-Type: NCOM

Housing (Y/N): N

CONTRACTOR

OWNER

PHASE ONE REGIONAL PARK LI
2929 K ST 30
SACRAMENTO CA 95816

ARCHITECT

KADO ED M AND ASSOCIATES
1661 GARDEN HY
SACRAENTO CA 95790

Nature of Work: NEW SHELL FOR FUTURE RETAIL/RESTAURANT AND SITE WORK

CONSTRUCTION LENDING AGENCY : I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____ Lender's Address _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class _____ License Number 9211661 _____ Date _____ Contractor Signature _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. _____ B & PC for this reason: _____

Date 11-1-01 _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 11-01-01 _____ Applicant/Agent Signature _____

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Exp Date _____

(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 11-1-01 _____ Applicant Signature _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

**County of Sacramento
Environmental Management Department
Environmental Health**

Page 1 of _____
Facility ID # _____

8475 Jackson Road, Suite 240 • Sacramento, CA 95826-3904 • Ph: (916) 875-8440 • Fax: (916) 875-8513

Food Facility Official Inspection Report

Address 3311 Power Inn Rd STE 104 D.B.A. Dunton Dunst Bastein Robby Zip 95826
 Owner/Operator B & B Trumbo Inc Business Phone _____

C.T. <u>52</u>	Program Record <u>PROO</u>	Type <u>1851</u>	() Routine/Initial	<input checked="" type="checkbox"/> Reinspection	() Complaint/Request	() Reinsp. Fee <u>38.00</u>
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The items marked and listed below are violations detailed in the California Health & Safety Code (CHSC), commencing § 113700. A checked item indicates it does not meet standard and is a violation of CHSC. "Major" is a critical violation that poses an imminent risk to public health. Unless otherwise specified, violations marked as "Major" must be corrected immediately or warrant immediate closure of the food establishment. "Minor" indicates a violation that does not pose an imminent public health risk, but warrants timely correction.

Major	Minor	CRITICAL STANDARD	Major	Minor	CRITICAL STANDARD
		Proper Food Holding Temperatures			Food Handler Personal Hygiene
		Hold potentially hazardous hot foods at or above 140°F.			Use of proper and adequate hand washing.
		Hold potentially hazardous cold foods at or below 41°F.			Maintain adequate and accessible hand washing facilities.
		Provide accurate thermometers for each refrigerator unit.			Approved Food Source
		Food temperatures are monitored using an accurate, readily available, probe-type thermometer.			Inspect food items at time of delivery.
		Minimum Cooking Temperatures			Retain shellstock tags for 90 days.
		Rapidly reheat to 165°F previously cooked foods that have been refrigerated.			Obtain all foods from an approved source, free from adulteration.
		Cook poultry & meat stuffed items to an internal temperature of 165°F.			Cooling Potentially Hazardous Foods
		Cook ground meats to 157°F or other approved temperature.			Cool hot foods from 140°F to 70°F within two hours and from 70°F to 41°F within four hours, or 140°F to 41°F within four hours.
		Cook pork to an internal temperature of 155°F.			Thawing Potentially Hazardous Foods
		Cook eggs and foods containing raw eggs to 145°F.			Thaw frozen foods in a refrigerator, under cold running water (75°F or cooler), a microwave, or as part of the cooking process.
		Food/Equipment Protection			General Facility Sanitation
		Clean and sanitize surfaces/equipment/utensils.			Facility is maintained in a sanitary manner, no insect or rodent infestation or major sanitation deficiencies.
		Prepare and store foods so as to be protected from contamination.			Other: Lighting and Ventilation, Materials and Finishes, Plumbing, Water Supply, Refuse, Permits.
		Properly identify, store, and use chemicals; properly store personal items (including medications).			Food Certification Examination
		Minimize bare hand contact with ready-to-eat foods.			Name:
		Use only approved additives.			Exam:
					Expiration:

- ① Gemin Oven disapproved, does not have NIF standard only certification. If certification is not provided within 14 days - remove oven. This oven is not to be used without certification.
- ② Handwash sink not sealed at top of splash back.
- ③ Some refrigerators - thermometers not properly calibrated.

OK to operate above items are corrected.

Law requires a sign be posted stating the most recent inspection report is available for review upon request.

Environmental Health Specialist Jim Sherman Phone (916) 875-8447
 Date: 7-23-02 Accepted by _____

The above violations must be corrected by noted above. A reinspection may be conducted and a reinspection fee assessed, as authorized by current County ordinance. This fee may not be charged if a mailed or faxed receipt or other satisfactory documentation showing proof of the correction or repair is received prior to the compliance date. The Building Department may require a permit for above corrections. Please contact the appropriate office for assistance.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 3311 POWER INN RD Permit No. 0105746

Building Use: RETAIL SHELL FOR RESTAURANT Occupancy: A3/B

Building Owner: PHASE ONE REGIONAL PARK LI Construction Type: VN

Owner Address: SACRAMENTO, CA Sprinkled? Yes No

Portion of Building Occupied: ENTIRE Area: 7573 Sq. Ft.

8/2/02

Date

Michael Bullock

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By:MW,LLS,KR,CP,MJG]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE *Perk*
 PERMIT AND CALCULATION SHEET *11/1/01*

APPLICATION NO: *City*
 GENERAL INFORMATION

BLDG PERMIT NO: *SWD 2001-0050*
 THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL	SF	<input type="checkbox"/>	MF	<input type="checkbox"/>	UNITS
CSD-1						
SRCSD						
CONSTRUCTION						
IN-LIEU						
TOTAL FEE						

APN: *079-0310-047*

DESCRIPTION/
 SUBDIVISION

LOT:

PROPERTY ADDRESS *3311 Powerline Rd.*

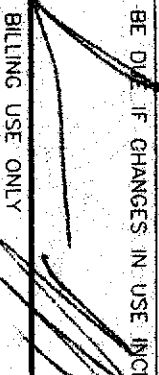
OWNER *Steve W. BASTIN*

MAILING ADDRESS *10115 Folsom Blvd.*

CITY-STATE-ZIP *Knoxville TN* PHONE *947-5033*

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE



CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

Certification of Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address 3311 POWER LANE RD 10111
Project Address 3311 POWER LANE RD
Parcel Number 079 0310-777 Lot No. _____
Subdivision Name _____ No. of Units _____
Applicant's Signature _____ Title _____
Phone No. 716 997-5030 Date 11-01-01

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0105716
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 7273
Signature/Title Steve Benson Building Supervisor Date 10-31-2001

Part III - To be completed by the SCHOOL DISTRICT

School District _____ Certificate No. _____
 Exempt Comments _____
Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ _____
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... = \$2120.44

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature _____ Date 11/1/01

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 01057460 Insp. Area 3C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3311 POWER INN RD Suite 100
 PARCEL # 079-0310-047

<p>CONTACT</p> <p>Name <u>STEVE LEBASTCHI</u> Street Address <u>10115 FOLGER BLVD</u> City/State/Zip <u>RANCHO COLOADO CA</u> Phone <u>917-5033</u> FAX <u>362-7967 95670</u> E-mail: <u>997-5032</u></p>	<p>LICENSED CONTRACTOR Lic No. # _____</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>
<p>ARCHITECT/ENGINEER (Date)</p> <p>Name <u>E. M. KADO</u> Address <u>1661 Garden Hwy</u> City/State/Zip <u>SACRAMENTO, CA 95833</u> Phone <u>921-1661</u> FAX <u>921-1939</u> E-mail: _____</p>	<p>OWNER</p> <p>Name <u>PHASE ONE REGIONAL PRK LTD</u> Address <u>3321 POWER INN RD #100</u> City/State/Zip <u>SAC CA 95826</u> Phone _____ FAX _____ E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: NEW SHELL FOR FUTURE RESTAURANT
Restaurant, 1000 sq ft.
 690,370.13

OCCUPANT/TENANT: _____ VALUATION: \$ 455,591.50

FLOOD STATUS: <u>A99</u>		S.C.A.T. 101, 201, 200, 207, X1.11, X1.12, X1.14, X1.21, X1.27, X1.6								
JOB DESCRIPTION		BLDG	<u>SHELL</u>	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>Y</u> <u>N</u>	Fed Code	Vio. File		
<u>2</u>	<u>6854</u>	<u>7573</u>	<u>C2</u>	<u>M</u>	<u>V-N</u>	<u>SPR</u> <u>ALARM</u>	<u>18</u>	[H]	[Quad]	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	D	<u>PW</u>	<u>UTIL</u>	

COMMENTS: FIRE SPRINKLER, FIRE ALARM, WOOD TRUSSES ARE DEFERRED ITEMS.

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

NEEDED

CITY OF SACRAMENTO
 BUILDING INSPECTION DIVISION
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: DLS partnership Phone: 997-5033
 Site Address: 3311 Powerline rd. Suite: _____
(Street) (Zip)
 Business Owner/Representative: STEVE LEBASTCHI Phone: 997-5033
 Nature of Business: Retail Building
 Property Owner: STEVE LEBASTCHI Phone: 997-5033
 Address: 10115 Folsom Blvd. Suite: _____
Rancho Cordova CA 95670
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes No Is this permit for a shell building? Yes No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes No

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes No

7. Is/Will your business be located within 1,000 feet of a school? Yes No

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: STEVE LEBASTCHI
(Print)
[Signature]
(Signature) 10-1-01
(Date)

BID Use Only: Plan Ck# _____ Permit # _____	
OK to issue prmt? Y _____	F.D. Appr Req'd? Yes No _____
init date _____	
Hold on Certificate of Occupancy? Yes No _____	
Fire Dept. Use Only:	
OK to issue permit? ini' _____	date _____
OK to issue Certificate of Occupancy? init _____ date _____	

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

X Project Address: POWER INN RA

Assessor's Parcel Number: 079-~~0310~~-~~047~~

Previous Use: VACANT

X Description of Request/Proposed Use: new retail building
WITH DRIVE THRU

Is This a Change of Use? NO

Prior Applications for Project Site(P#, Z#, DRPB#): P00-107, P00-066 Zoning Designation: R2-PUD

Comments: SUBJECT TO CONDITIONS OF
P00-066 > P00-107

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: Michael York 5-7-01

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) NO
2. I (have/have not) Have signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name TOWN & COUNTY Address 4410 OLYMPIA LN. #
City RANCHO CARBON CA Telephone 636-9500
Contractors License No. C486492

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

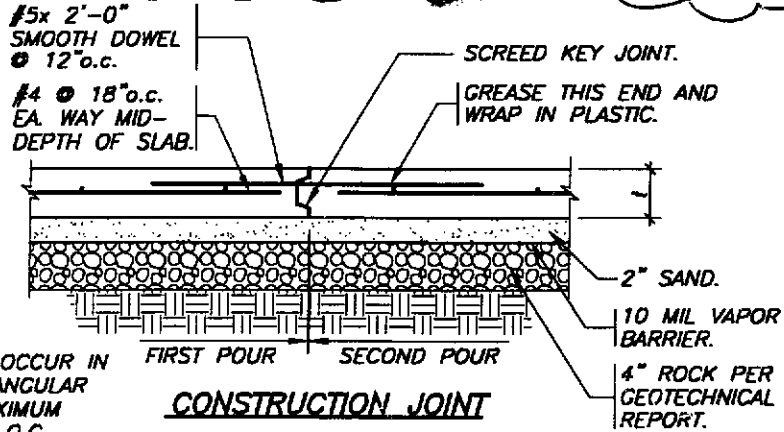
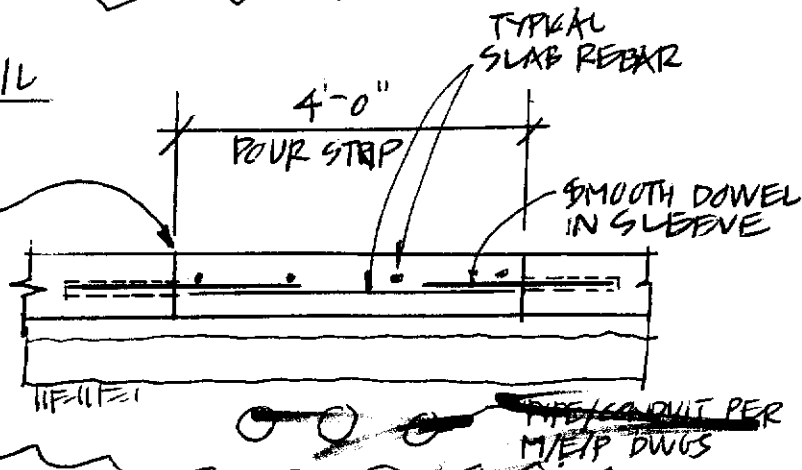
Signed [Signature]

Job Address 3311 POWER LN

Permit No: 0105746

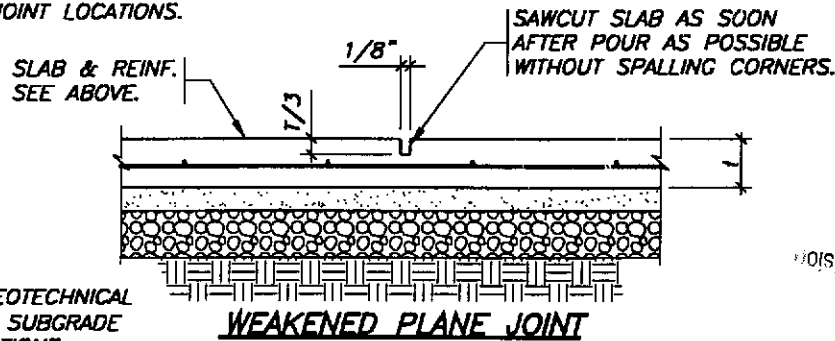
02A-000
GRANITE PARK RETAIL

AT POUR STRIP OVER
 MAIN PLUMBING/CONDUIT
 TRENCH, POINT ON
 EACH SIDE CAN BE
 FORMED W/O KEY.



NOTE:

1. SLAB JOINTS SHALL OCCUR IN A SQUARE OR RECTANGULAR PATTERN WITH A MAXIMUM SPACING OF 15'-0" O.C.. CONTRACTOR SHALL SUBMIT LAYOUT PLAN SHOWING PROPOSED JOINT LOCATIONS.



**TYPICAL
 SLAB-ON-GRADE JOINTS**

1
 81.2

SCALE: 1" = 1'-0"

81-2001

CITY COPY

3311 Power Inn Rd
 0105746 Shell
 Bryon Nakashima



12/20/01

ISSUED
 06/20/01
 Treatment Building Division



INTEGRATED DESIGN GROUP

STRUCTURAL ENGINEERING
 9700 Business Park Dr., Suite 301
 Sacramento, California 95827
 916-363-7222 Fax 916-363-0387

Sheet No. SK-1

Rev. No. _____

Job No. 024-006
 Client EM KADO

Job GRANITE PARK RETAIL
 Subject _____

By DPS Date 1/11/2002
 Chk'd _____ Date _____

BEAM/COLUMN DETAIL AT GRID C.1/3

